

TRANSCRIPT ORDER

DUE DATE:

1. NAME Steven G. Biddle				2. PHONE NUMBER 602-474-3613		3. DATE 8/8/2024	
4. FIRM NAME Littler Mendelson							
5. MAILING ADDRESS 2425 East Camelback Road, Suite 900				6. CITY Phoenix		7. STATE AZ	
9. CASE NUMBER 2:24-cv-01356-DJH		10. JUDGE Humetewa		DATES OF PROCEEDINGS			
				11. 8/9/2024		12.	
13. CASE NAME National Labor Relations Board v. Lucid Motors				LOCATION OF PROCEEDINGS			
				14. CITY Phoenix		15. STATE AZ	
16. ORDER FOR							
<input type="checkbox"/> APPEAL		<input type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT		<input type="checkbox"/> BANKRUPTCY	
<input type="checkbox"/> NON-APPEAL		<input checked="" type="checkbox"/> CIVIL		<input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> OTHER (Specify)	
17. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested.)							
PORTIONS		DATE(S)		PORTION(S)		DATE(S)	
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify)			
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)							
<input type="checkbox"/> OPENING STATEMENT (Defendant)							
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING			
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)							
<input type="checkbox"/> OPINION OF COURT							
<input type="checkbox"/> JURY INSTRUCTIONS				<input checked="" type="checkbox"/> OTHER (Specify)		Injunction Hearing 8/9/2024	
<input type="checkbox"/> SENTENCING							
<input type="checkbox"/> BAIL HEARING							
18. ORDER							
CATEGORY	ORIGINAL + 1 (original to Court, copy to ordering party)	FIRST COPY	# OF ADDITIONAL COPIES	DELIVERY INSTRUCTIONS (Check all that apply.)		ESTIMATED COSTS	
30-Day (Ordinary)	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> PAPER COPY			
14-Day Transcript	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/> PDF (e-mail)			
7-Day (Expedited)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/> ASCII (e-mail)			
3 -Day Transcript	<input type="checkbox"/>	<input type="checkbox"/>					
Next-Day (Daily)	<input type="checkbox"/>	<input type="checkbox"/>					
2-Hour (Hourly)	<input type="checkbox"/>	<input type="checkbox"/>					
Realtime Transcript	<input type="checkbox"/>	<input type="checkbox"/>					
CERTIFICATION (19. & 20.) By signing below, I certify that I will pay all charges (deposit plus additional).				E-MAIL ADDRESS sbiddle@littler.com			
19. SIGNATURE /s/ Steven G. Biddle				NOTE: IF ORDERING MORE THAN ONE FORMAT, THERE WILL BE AN ADDITIONAL CHARGE.			
20. DATE 8/8/2024							
TRANSCRIPT TO BE PREPARED BY				ESTIMATE TOTAL			
ORDER RECEIVED	DATE	BY	PROCESSED BY		PHONE NUMBER		
DEPOSIT PAID			DEPOSIT PAID				
TRANSCRIPT ORDERED			TOTAL CHARGES				
TRANSCRIPT RECEIVED			LESS DEPOSIT				
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED				
PARTY RECEIVED TRANSCRIPT			TOTAL DUE				